PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003								Application or Docket Number					
									9	6	27	>29	
CLAIMS AS FILED - PART I								IALL E	NTITY		OTHER	THAN	
TC	OTAL CLAIMS		(Column	า 1)	(Column 2)		-	TYPE		OR	SMALL		
			21				1	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	ASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			Sminus 20=		* \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			X\$ 9=		OR	X\$18=C	234	
INDEPENDENT CLAIMS			minus 3 =		ع ا			X42=		OR	X84=		
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	a780.	
* If the difference in column 1 is less than zero, enter "0" in column 2						 T	OTAL		OR	TOTAK	1260		
CLAIMS AS AMENDED - PART II									L		OTHER	THAN	
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						_ s	SMALL ENTITY			SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM					1			
							+	-140=		OR	+280=		
							ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
	100	(Column 1) CLAIMS		(Colur		(Column 3)	_		T : = = .				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	,	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		-			1	4		
		,					+	140=		OR	+280=		
TOTAL ADDIT. FEE										OR	TOTAL ADDIT, FEE	<u> </u>	
		(Column 1) CLAIMS		(Colur		(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***			1	<42=		5	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.,		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20,"										OR	TOTAL ADDIT, FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											umn 1.		